

In re Application of:

HIROSHI KOGA

Application No.: 09/987,833

Filed: November 16, 2001

For: AUTOMATIC AUTHENTICATION METHOD
AND SYSTEM IN PRINT PROCESS



Docket No. 00862.022437.

Examiner: Benjamin E. Lanier

Group Art Unit: 2132

Date: May 19, 2006

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment and Request For Interview in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

| CLAIMS AS AMENDED | | | | | | |
|--|--|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * 40 | MINUS | ** 40 | = 0 | x \$25 \$50 | 0 |
| INDEP. CLAIMS | * 10 | MINUS | *** 10 | = 0 | x \$100 \$200 | 0 |
| Fee for Multiple Dependent claims \$180°/\$360 | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--- | | | | | | 0 |

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 790.00 to cover the Request For Continued Examination (RCE) fee is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$ _____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Edward A. Kmett
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Registration No.: 42,746

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Form #120

CA_MAIN 114114v1

A circular ink stamp from the OIPE IAP88 Patent & Trademark Office. The text "OIPE IAP88" is curved along the top inner edge, and "PATENT & TRADEMARK OFFICE" is curved along the bottom inner edge. In the center, the date "MAY 22 2006" is stamped horizontally. To the right of the stamp, the word "In" is partially visible.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

May 19, 2006

PRELIMINARY AMENDMENT AND REQUEST FOR INTERVIEW

Prior to further examination of the above-identified application for which a Request For Continued Examination has been filed, please amend the application as follows.